

Mount Pleasant Acres Camp

"Home of SASD Training Site"

For Office Use Only:

Work Hours Credit: \$ _____

Pro-rated Membership Fee: \$ _____

Membership: \$ _____

By: Cash Check/No. _____

Debit/Credit Date: _____

Range Orientation Date: _____

Chief Trainer approval: _____

Approved Date: _____

MEMBERSHIP APPLICATION

Application for Calendar Year: _____		<input type="checkbox"/> New Membership (\$50)		<input type="checkbox"/> Renewal (\$25)	
Type (Check One):	Single (\$50 mo.) <input type="checkbox"/>	Family "Household Only" (\$70 mo.) <input type="checkbox"/>	Gold Member (\$85 mo.) <input type="checkbox"/>	Military (50% off) <input type="checkbox"/>	
Primary Member Name:			<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Spouse / Partner Name:			<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Child (under 18): Name & Age			<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Child (under 18): Name & Age			<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Child (under 18): Name & Age			<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Primary Email:			Spouse/ Partner:		
Street:		City:	State:	Zip:	
Primary Phone:			S/P Phone:		

Item of Information Required: (Circle One)	Primary Member	Spouse/ Partner
Date of Birth (year/month/day)		
Are you a U.S. Citizen?	Yes / No	Yes / No
If no, are you a lawful permanent resident of the U.S.?	Yes / No	Yes / No
Have you ever been convicted of a felony?	Yes / No	Yes / No
Do you have any outstanding warrants?	Yes / No	Yes / No

Conditions of Membership

1. **I UNDERSTAND** that I am not eligible to be presented for membership acceptance until I have attended the required safety orientation class, demonstrate firearms safety, and have passed the range rules test. (New members only)
2. **I WILL** read and abide by Mount Pleasant Acres Camp Range Rules and Policies.
3. **I UNDERSTAND** that I am responsible for anyone using camp facilities covered under my membership.
4. **I UNDERSTAND** that I am prohibited from giving out camp address.
5. **I UNDERSTAND** I must have my camp Membership Card while on camp property and must present it to any staff member on the property who requests it.
6. **I UNDERSTAND** that all members are required to renew their membership by December 31st of each year.
7. **I UNDERSTAND** that both commercial and non-commercial audio, video recording and/or motion picture photography may occur during my presence on MPAC property and as long as I am in the general area, I may be included in such photography/recording(s). Absent such action on my part, I hereby grant MPAC, its agents, volunteers, sponsors, beneficiaries, heirs and assigns the right to use my photographic image and audio/video recording(s) in the promotion of the shooting sports or MPAC in general as it chooses in its sole discretion without compensation.
8. **I UNDERSTAND** that any misrepresentation on this application will result in termination of my membership without any refund of paid fees.
9. **I UNDERSTAND** and agree that my use of Mount Pleasant Acres Camp or participation in camp activities is voluntary and represents a possible hazard to myself and guests. I am responsible to read, understand, and obey all camp and range rules. I assume all such risks freely and further hold all persons and/or business, associated with any event or contest held on camp premises that I may participate in, to be blameless in the case of injury and/or death during such event or contest.
10. **I UNDERSTAND** that by providing my/our e-mail address(es) I/we agree to allow the camp to add my/our email address(es) to the camp's e-mail list(s) and to send me/us e-mail notifications based on my/our configured preferences. The camp's e-mail alerts will be used for camp business only and the camp will not divulge your email address(es) to anyone outside the camp without your permission.

I _____ complete and sign this application to Mount Pleasant Acres Camp knowing that my signature constitutes my knowledge and understanding of, acceptance of, and agreement to **ALL** the above statements. I further state that the information herein is to the best of my knowledge and ability to be true and correct. My acceptance shall remain in force so long as I remain a member of the camp.

Signature (Primary) _____ **Date** _____

Signature (Spouse/Partner) _____ **Date** _____